

File Number: <b>84-1502</b>
For the reporting period ended December 31, <b>2006</b>



**07000059**

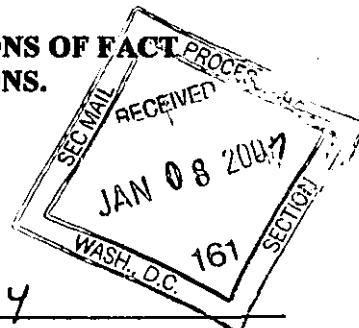
**SECURITIES AND EXCHANGE COMMISSION**  
Washington, D.C. 20549

<b>OMB APPROVAL</b>	
OMB Number:	3235-0337
Expires:	September 30, 2009
Estimated average burden hours per full response:	6.00
Estimated average burden hours per intermediate response:	1.50
Estimated average burden hours per minimum response:	.50

## FORM TA-2

### FORM FOR REPORTING ACTIVITIES OF TRANSFER AGENTS REGISTERED PURSUANT TO SECTION 17A OF THE SECURITIES EXCHANGE ACT OF 1934

**ATTENTION: INTENTIONAL MISSTATEMENTS OR OMISSIONS OF FACT  
CONSTITUTE FEDERAL CRIMINAL VIOLATIONS.**  
See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a)



1. Full name of Registrant as stated in Question 3 of Form TA-1:  
(Do not use Form TA-2 to change name or address.)

**AFFILIATED STOCK TRANSFER COMPANY**

2. a. During the reporting period, has the Registrant engaged a service company to perform any of its transfer agent functions?  
(Check appropriate box.)

☐ All

☐ Some

☒ None

- b. If the answer to subsection (a) is all or some, provide the name(s) and transfer agent file number(s) of all service company(ies) engaged:

Name of Transfer Agent(s):	File No. (beginning with 84- or 85-):
<b>PROCESSED</b>	
<b>JAN 11 2007</b>	
<b>THOMSON FINANCIAL</b>	

- c. During the reporting period, has the Registrant been engaged as a service company by a named transfer agent to perform transfer agent functions?

☐ Yes

☒ No

- d. If the answer to subsection (c) is yes, provide the name(s) and file number(s) of the named transfer agent(s) for which the Registrant has been engaged as a service company to perform transfer agent functions: (If more room is required, please complete and attach the Supplement to Form TA-2.)

Name of Transfer Agent(s):	File No. (beginning with 84- or 85-):

*Handwritten signature and date 1/10*

11. a. During the reporting period, provide the date of all database searches conducted for lost securityholder accounts listed on the transfer agent's master securityholder files, the number of lost securityholder accounts for which a database search has been conducted, and the number of lost securityholder accounts for which a different address has been obtained as a result of a database search:

Date of Database Search	Number of Lost Securityholder Accounts Submitted for Database Search	Number of Different Addresses Obtained from Database Search
FEBRUARY 2006	14	10
MARCH / APRIL 2006	2	1
AUGUST 2006	6	3
SEPTEMBER 2006	21	73

- b. Number of lost securityholder accounts that have been remitted to states during the reporting period: ..... 0

SIGNATURE: The Registrant submitting this Form, and the person signing the Form, hereby represent that all the information contained in the Form is true, correct, and complete.

Manual signature of Official responsible for Form:  <i>Carole Taormina</i>	Title: <i>PRESIDENT</i>  Telephone number: <i>386-734-6215</i>
Name of Official responsible for Form: (First name, Middle name, Last name)  <i>CAROLE TAORMINA</i>	Date signed (Month/Day/Year):  <i>January 2, 2007</i>

**AFFILIATED STOCK TRANSFER COMPANY**

105 Ridgeway Boulevard  
Deland, FL 32724-8807

Tele: 386-734-6215  
Fax: 386-734-6157

January 2, 2007

Securities & Exchange Commission  
450 5<sup>th</sup> Street, N.W.  
Washington, D.C 20549-0013

Attention: Form TA-2 Filing Dept.



To Whom It May Concern:

Enclosed you will find an original and two copies of Form TA-2 for 2006.  
An additional copy is forwarded to our regional office in Miami, Florida.

Very truly yours,

*Carole Taormina*

Carole Taormina